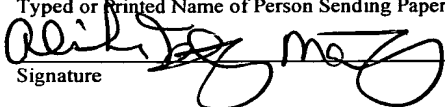


IFW



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Alisha Flintroy-Mathis  
Typed or Printed Name of Person Sending Paper or Fee  
  
Signature  
August 29, 2005  
Date

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the application of	)	
	)	
Albert A. Alexander	)	Examiner: Unknown
	)	
Title: ASSESSMENT TOOL AND METHOD	)	Art Unit: 3713
FOR EVALUATING A PERSON'S QUALITY	)	
OF LIFE	)	
	)	Confirmation No. 1229
Serial No.: 10/816,565	)	
	)	
Filed On: April 1, 2004	)	(Docket No. 6930-0001-1)

*Hartford, Connecticut, August 29, 2005*

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

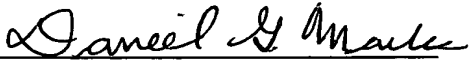
STATUS LETTER

On June 23, 2004, Applicant received a Filing Receipt  
(copy enclosed) in connection with the above-identified patent application.

As of this date, Applicant has not received an office action relating to  
the above-identified patent application. Applicant therefore requests a status  
report be provided for the above-identified patent application.

Please charge any additional fees or credit overpayment to Deposit  
Account No. 13-0235.

Respectfully submitted,

By   
Daniel G. Mackas  
Registration No. 38,541  
Attorney for the Applicant

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APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/816,565	04/01/2004	3713	385	6930-0001-1	5	14	2

35301

MCCORMICK, PAULDING & HUBER LLP  
CITY PLACE II  
185 ASYLUM STREET  
HARTFORD, CT 06103

**RECEIVED**  
JUN 23 2004  
McCormick, Paulding & Huber

CONFIRMATION NO. 1229

## FILING RECEIPT



\*OC000000013008024\*

Date Mailed: 06/21/2004

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

Albert A. Alexander, Coventry, CT;

## Domestic Priority data as claimed by applicant

This appln claims benefit of 60/460,204 04/03/2003

## Foreign Applications

If Required, Foreign Filing License Granted: 06/18/2004

Projected Publication Date: 10/07/2004

Non-Publication Request: No

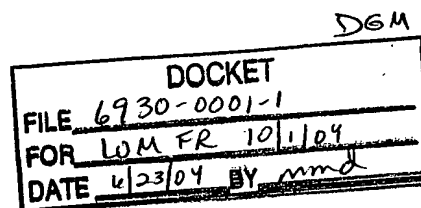
Early Publication Request: No

\*\* SMALL ENTITY \*\*

## Title

Assessment tool and method for evaluating a person's quality of life

## Preliminary Class



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